Jee Only Attorney Docket: MCHK/148/US



polication No.: 10/749,964

Group Art Unit: 3712

Michael Pong Kei Wong

December 31, 2003

Examiner: Michael Zarroli

**Electrical Connector** 

Mail Stop Amendment ommissioner for Patents United States Patent and Trademark Office **7.**0. Box 1450 Jexandria, VA 22313-1450

## **RESPONSE TO OFFICE ACTION**

Sir:

Applicant respectfully requests reconsideration of the rejections in the Office Action mailed on December 8, 2004 in view of the following amendments and remarks.

Amendments to the Drawings begin on page 2 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.

Listing of Claims begin on page 3

Remarks begin on page 9.

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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10-749-464

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20				F	ATE	FEE	1	RATE	FEE .	
FOR NUMBER				FILED	NUMB	ER EXTRA	ВА	SIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS 20				nus 20=	· 10		>	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS 3 =					•	0	\[\frac{1}{2}\]	(43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+	145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "(						olumn 2	T	OTAL	385-	OR	TOTAL	<b>1</b>	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column						SI	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A	4/11/05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	- 16	Minus	<b>~</b> 2	0	- /	×	\$ =	/	OR	X\$35=		
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	•		•				ADD	TOTAL	600.00		TOTAL ADDIT, FEE		
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	••	<u>.</u>	×	§ 9=		OR	X\$18=		
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	FIRST PRESE	NTATION OF ML	JETIPLE DEF	ENDENT	CLAIM		+1	45=		OR	+290=		
									•	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHI NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		= .	X	9=		OR	X\$18=		
	Independent	•	Minus	***		=	×	13=	·	o'R	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	45=		OR	+290=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												